

## **SAFETY FIRE COMMISSIONER**

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER • COMPTROLLER GENERAL

## Ralph T. Hudgens, Commissioner

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HAZARDOUS MATERIALS

www.oci.ga.gov

## APPLICATION FOR PERMIT TO CONDUCT OUTDOOR FIREWORKS AND/OR PYROTECHNICS DISPLAYS

GID-273-SF JUN11

County of Display:		Georgia License Number: _	(If Applicable)
NFPA-112	to the Rules and Regulations of the Safety Fire Cor 6, application is hereby made for permit to conduct s application will not be processed if incomplete.	t Proximate Audience Outdoor Fireworks an	<del>-</del>
Date:	Date of Display:	Time of Display: Start:	End:
	A	PPLICANT INFORMATION	
Name of	Operator:		
Address:			
City:	County:	State: Zip:	Phone:
Company	Name:		
Address:			
City:	County:	State: Zip:	Phone:
Exact Loc	ation of Fireworks/Pyrotechnics Display:		
Property	owner or representative granting permission	for use of site and/or venue:	
Name (Pr	rint):	Signature:	
UN Classi	fication of Products being used in Display:		
Maximun	n quantity of fireworks and/or pyrotechnics to	be used:	
Person(s)	conducting Display:		
ATFE License Number:		Expires:	
THE DISP	LAY SHALL BE CONDUCTED BY A COMPETEN	TOPERATOR TO BE DETERMINED BY TH	E PROBATE COURT OF SAID COUNTY:
	ns other than the operator and his assistants		
Minimum Area of Fallout Required:		Fire Suppression Provided:	
o <u>E</u> o <u>E</u> o <u>E</u> o <u>E</u>	nts to be provided by operator: <u>Proof of Insurance</u> : A copy of valid comprehensive leads be provided with this application. No permit was proof of Bonding: No permit will be considered unlead of the Approval from the Local Fire Official: <u>Provide List to this Court of Competent As</u> sistants: <u>Inder the penalties of perjury that the foregoing stantary in the content Assistants.</u>	vill be considered unless this is provided. ess this is provided. No permit will be considered unless this is p No permit will be considered unless this is p	rovided. provided.
	e and belief are correct.	пентенть ин типь аррисации наче веен ехант	illied by file, and to the best of fily
	Signature of (	Operator:	<del>-</del>
	Sworn to and Subscribed before Me this	day of,,	
NOTARY	In the County of	, State of	· (Seal)
	(Notary Public)	(My Commission Expires)	